

NY STATE CLIENT SEMI-ANNUAL REPORT

Marking Instructions: Please type or use blue or black ink pen.
Completely fill in one circle.
Print legible numbers and block letters, no script.

COMPLETE ALL SECTIONS
before submitting or form will be returned.

I Reporting Information

Year: 2013

Fill in circle if amendment

Report Period: January/June July/December

Type of Lobbying: Nonprocurement Procurement Both

Client Filing Fee Check Number:

FOR OFFICE USE ONLY

Amendment
Cjm **HAND DELIVERED**
amended for Soft
RECEIVED JUL 12 2013

II Client Information

Name: The Business Council of NYS, Inc.

Permanent Business Address: 152 Washington Ave

City: Albany

State: NY

ZIP code: 12210

Business Phone: (518) 465-7511

Fax Number: (518) 465-4389

Third Party Beneficiary (see instructions):

III Lobbyist(s) Information & Compensation (Current Period Only)

Any individual or organization that has lobbied on behalf of the client must be reported below, regardless of whether the threshold was exceeded by that individual or organization.

A Type of Lobbyist: Retained Employed Designated

Level of Gov't: State Lobbying Local Lobbying Both

Name:

Phone Number:

Address:

City:

State:

ZIP code:

Compensation for current period: \$.00

B Type of Lobbyist: Retained Employed Designated

Level of Gov't: State Lobbying Local Lobbying Both

Name:

Phone Number:

Address:

City:

State:

ZIP code:

Compensation for current period: \$.00

C Type of Lobbyist: Retained Employed Designated

Level of Gov't: State Lobbying Local Lobbying Both

Name:

Phone Number:

Address:

City:

State:

ZIP code:

Compensation for current period: \$.00

Continued on attached pages

D TOTAL COMPENSATION of ALL lobbyists for current period.....(A+B+C+addendum sheets): \$.00

IV Other Expenses (Current Semi-Annual Period Only)

A Report in the aggregate all expenses less than or equal to \$75: \$.00

B Report in the aggregate all expenses for salaries of non-lobbying employees: \$.00

C Itemize each expense exceeding \$75:

PAID TO: _____ DATE: / / Ad Social Event

PURPOSE: _____ AMOUNT: \$.00 *Addendum attached

PROCUREMENT NONPROCUREMENT

PAID TO: _____ DATE: / / Ad Social Event

PURPOSE: _____ AMOUNT: \$.00 *Addendum attached

PROCUREMENT NONPROCUREMENT

Continued on attached pages

* If any expense listed above exceeds \$75 for an individual, you must attach the addendum page listing the expense, dollar amount attributable to the individual and the name, title and employer of the individual.

D Total expenses for current period: \$.00 (if applicable, include all expenses from attached pages in total)

V Source of Funding Disclosure

Instructions: In the event only one person or entity is listed as the Single Source for a Contribution(s), use Section A. In the event multiple persons or entities have been aggregated as a Single Source for a Contribution(s), use Section B.

A Below, list all Contributions received from the Single Source. Include the date and the amount of the Contribution received. If more than five Contributions from the Single Source have been received, use section V(C) of the Addendum for the additional Contributions.

Contribution(s) from Single Source #1

Single Source Entity's Name: AETNA Life Insurance Co.

or
Single Source Person's Last Name: _____ First Name: _____

Address: 17 Lewis Road

City: Stamford

State: CT

ZIP code: 06905-2214

Phone: (203) 322-1755

Date Contribution Received:	05 / 31 / 2013	Amount of Contribution:	\$ 825 .00
Date Contribution Received:	06 / 27 / 2013	Amount of Contribution:	\$ 2,500 .00
Date Contribution Received:	/ /	Amount of Contribution:	\$.00
Date Contribution Received:	/ /	Amount of Contribution:	\$.00
Date Contribution Received:	/ /	Amount of Contribution:	\$.00

Check here if using section V(C) of the Addendum for additional Contributions:

Contribution(s) Single Source #2

Single Source Entity's Name: ALM Media

or
Single Source Person's Last Name: _____ First Name: _____

Address: 120 Broadway, Lbby L5

City: New York

State: NY

ZIP code: 10271-0002

Phone: (212) 457-9400

Date Contribution Received:	03 / 11 / 2013	Amount of Contribution:	\$ 2,500 .00
Date Contribution Received:	/ /	Amount of Contribution:	\$.00
Date Contribution Received:	/ /	Amount of Contribution:	\$.00
Date Contribution Received:	/ /	Amount of Contribution:	\$.00
Date Contribution Received:	/ /	Amount of Contribution:	\$.00

Check here if using section V(C) of the Addendum for additional Contributions:

Check here if there are Contribution(s) from Single Source(s) other than those listed above. Use Section V(A) of the Addendum to list all such Contributions:

Designated Addendum sheet for section V(A)

Please use the following addendum pages as continuation for the specified sections. If additional space is needed, please make a copy of this sheet.

V Source of Funding Disclosure

A Below, list all Contributions received from the Single Source. Include the date and the amount of the Contribution received.

Contributions from Single Source #3

Single Source Entity's Name: Altria Client Services, Inc.

or
Single Source Person's Last Name:

First Name:

Address: 677 Broadway

State: NY

ZIP code: 12207-2996

City: Albany

Phone: (518) 431-8090

Date Contribution Received:	03	/20	/2013	Amount of Contribution:	\$3,975	.00
Date Contribution Received:	/	/		Amount of Contribution:	\$.00
Date Contribution Received:	/	/		Amount of Contribution:	\$.00
Date Contribution Received:	/	/		Amount of Contribution:	\$.00
Date Contribution Received:	/	/		Amount of Contribution:	\$.00

Check here if using section V(C) of the Addendum for additional Contributions:

Contributions from Single Source # 4

Single Source Entity's Name: Armstrong Communications

or
Single Source Person's Last Name:

First Name:

Address: 109 S Warren St

State: NY

ZIP code: 13202-1798

City: Syracuse

Phone: (315) 474-7200

Date Contribution Received:	01	/02	/2013	Amount of Contribution:	\$ 275	.00
Date Contribution Received:	03	/25	/2013	Amount of Contribution:	\$ 750	.00
Date Contribution Received:	05	/09	/2013	Amount of Contribution:	\$ 1,875	.00
Date Contribution Received:	/	/		Amount of Contribution:	\$.00
Date Contribution Received:	/	/		Amount of Contribution:	\$.00

Check here if using section V(C) of the Addendum for additional Contributions:

Contributions from Single Source #5

Single Source Entity's Name: AT&T, Inc.

or
Single Source Person's Last Name:

First Name:

Address: 111 Washington Ave

State: NY

ZIP code: 12210-2213

City: Albany

Phone: (518) 463-3107

Date Contribution Received:	01	/11	/2013	Amount of Contribution:	\$9	.00
Date Contribution Received:	02	/05	/2013	Amount of Contribution:	\$5,682	.00
Date Contribution Received:	03	/18	/2013	Amount of Contribution:	\$9	.00
Date Contribution Received:	/	/		Amount of Contribution:	\$.00
Date Contribution Received:	/	/		Amount of Contribution:	\$.00

Check here if using section V(C) of the Addendum for additional Contributions:

Designated Addendum sheet for section V (A)

Please use the following addendum pages as continuation for the specified sections. If additional space is needed please make a copy of this sheet.

V Source of Funding Disclosure

A: Below, list all Contributions received from a Single Source. Include the date and the amount of the Contribution received.

Contributions from Single Source # 6

Single Source Entity's Name: Avon Products, Inc.
or

Single Source Person's Last Name:

First Name:

Address: 777 3rd Ave

City: New York

State: NY

Zip code: 10017-1401

Phone: (212) 282-5612

Date Contribution Received: 6/17/2013

Amount of Contribution: \$ 3,243

Date Contribution Received:

Amount of Contribution: \$

Check here if using V-C of the Addendum for additional Contributions:

Contributions from Single Source # 7

Single Source Entity's Name: Beech-Nut Nutrition Corporation
or

Single Source Person's Last Name:

First Name:

Address: 100 Hero Drive

City: Amsterdam

State: NY

Zip code: 12010-8348

Phone: (518) 839-0300

Date Contribution Received: 1/16/2013

Amount of Contribution: \$ 1,283

Date Contribution Received:

Amount of Contribution: \$

Check here if using V-C of the Addendum for additional Contributions:

Contributions from Single Source # 8

Single Source Entity's Name: Bristol-Myers Squibb Company
or

Single Source Person's Last Name:

First Name:

Address: 104 Valley Street

City: Beverly Farms

State: MA

Zip code: 01915-2224

Phone: (978) 232-1147

Date Contribution Received: 2/5/2013

Amount of Contribution: \$ 1,771

Date Contribution Received:

Amount of Contribution: \$

Check here if using V-C of the Addendum for additional Contributions:

Designated Addendum sheet for section V (A)

Please use the following addendum pages as continuation for the specified sections. If additional space is needed please make a copy of this sheet.

V Source of Funding Disclosure

A: Below, list all Contributions received from a Single Source. Include the date and the amount of the Contribution received.

Contributions from Single Source # 9

Single Source Entity's Name: Broadridge Financial Solutions
or

Single Source Person's Last Name:

First Name:

Address: 205 River Road

City: Grandview

State: NY

Zip code: 10960-5001

Phone: (845) 398-0550

Date Contribution Received: 3/8/2013

Amount of Contribution: \$ 4,053

Date Contribution Received:

Amount of Contribution: \$

Check here if using V-C of the Addendum for additional Contributions:

Contributions from Single Source # 10

Single Source Entity's Name: Buffalo Trotting Assn dba Hamburg Casino/Buffalo Raceway
or

Single Source Person's Last Name:

First Name:

Address: 5600 McKinley Parkway

City: Hamburg

State: NY

Zip code: 14075-3933

Phone: (716) 646-6109

Date Contribution Received: 3/4/2013

Amount of Contribution: \$ 2,796

Date Contribution Received:

Amount of Contribution: \$

Check here if using V-C of the Addendum for additional Contributions:

Contributions from Single Source # 11

Single Source Entity's Name: Canton-Potsdam Hospital
or

Single Source Person's Last Name:

First Name:

Address: 50 Leroy Street

City: Potsdam

State: NY

Zip code: 13676-1786

Phone: (315) 265-3300

Date Contribution Received: 2/19/2013

Amount of Contribution: \$ 1,804

Date Contribution Received:

Amount of Contribution: \$

Check here if using V-C of the Addendum for additional Contributions:

Designated Addendum sheet for section V (A)

Please use the following addendum pages as continuation for the specified sections. If additional space is needed please make a copy of this sheet.

V Source of Funding Disclosure

A: Below, list all Contributions received from a Single Source. Include the date and the amount of the Contribution received.

Contributions from Single Source # 12

Single Source Entity's Name: Capital District Physicians Health Plan
or

Single Source Person's Last Name:

First Name:

Address: 500 Patroon Creek Blvd

City: Albany

State: NY

Zip code: 12206-1057

Phone: (518) 641-5070

Date Contribution Received: 3/5/2013

Amount of Contribution: \$ 22

Date Contribution Received: 5/2/2013

Amount of Contribution: \$ 2,156

Date Contribution Received:

Amount of Contribution: \$

Date Contribution Received:

Amount of Contribution: \$

Date Contribution Received:

Amount of Contribution: \$

Check here if using V-C of the Addendum for additional Contributions:

Contributions from Single Source # 13

Single Source Entity's Name: Cargill, Inc.

Single Source Person's Last Name:

First Name:

Address: PO Box 5650

City: Minneapolis

State: MN

Zip code: 55440-5650

Phone: (952) 742-6780

Date Contribution Received: 3/25/2013

Amount of Contribution: \$ 1,275

Date Contribution Received:

Amount of Contribution: \$

Check here if using V-C of the Addendum for additional Contributions:

Contributions from Single Source # 14

Single Source Entity's Name: Carrier Corporation

Single Source Person's Last Name:

First Name:

Address: 1 Carrier Place

City: Farmington

State: CT

Zip code: 06032-2562

Phone: (860) 674-3006

Date Contribution Received: 5/9/2013

Amount of Contribution: \$ 2,998

Date Contribution Received:

Amount of Contribution: \$

Check here if using V-C of the Addendum for additional Contributions:

Designated Addendum sheet for section V (A)

Please use the following addendum pages as continuation for the specified sections. If additional space is needed please make a copy of this sheet.

V Source of Funding Disclosure

A: Below, list all Contributions received from a Single Source. Include the date and the amount of the Contribution received.

Contributions from Single Source # 15

Single Source Entity's Name: CHA
or

Single Source Person's Last Name:

First Name:

Address: 3 Winners Circle

City: Albany

State: NY

Zip code: 12205-1161

Phone: (518) 453-4500

Date Contribution Received: 1/4/2013

Amount of Contribution: \$ 1,236

Date Contribution Received: 4/8/2013

Amount of Contribution: \$ 60

Date Contribution Received: 4/15/2013

Amount of Contribution: \$ 72

Date Contribution Received: 6/20/2013

Amount of Contribution: \$ 238

Date Contribution Received:

Amount of Contribution: \$

Check here if using V-C of the Addendum for additional Contributions:

Contributions from Single Source # 16

Single Source Entity's Name: Chemung Canal Trust Company

or

Single Source Person's Last Name:

First Name:

Address: PO Box 1522

City: Elmira

State: NY

Zip code: 14902-1522

Phone: (607) 737-3711

Date Contribution Received: 4/29/2013

Amount of Contribution: \$ 1,300

Date Contribution Received:

Amount of Contribution: \$

Check here if using V-C of the Addendum for additional Contributions:

Contributions from Single Source # 17

Single Source Entity's Name: Citibank

or

Single Source Person's Last Name:

First Name:

Address: Global Consumer Bank AML Project Office

City: Long Island City

State: NY

Zip code: 11120

Phone: (718) 248-3388

Date Contribution Received: 2/4/2013

Amount of Contribution: \$ 26,204

Date Contribution Received:

Amount of Contribution: \$

Check here if using V-C of the Addendum for additional Contributions:

Designated Addendum sheet for section V (A)

Please use the following addendum pages as continuation for the specified sections. If additional space is needed please make a copy of this sheet.

V Source of Funding Disclosure

A: Below, list all Contributions received from a Single Source. Include the date and the amount of the Contribution received.

Contributions from Single Source # 18

Single Source Entity's Name: Citizens Bank, N.A.
or

Single Source Person's Last Name:

First Name:

Address: 833 Broadway

City: Albany

State: NY

Zip code: 12207-2415

Phone: (518) 426-6483

Date Contribution Received: 2/6/2013

Amount of Contribution: \$ 3,401

Date Contribution Received:

Amount of Contribution: \$

Check here if using V-C of the Addendum for additional Contributions:

Contributions from Single Source # 18

Single Source Entity's Name: City University of New York
or

Single Source Person's Last Name:

First Name:

Address: 535 E 80th Street

City: New York

State: NY

Zip code: 10021-0711

Phone: (212) 794-5317

Date Contribution Received: 3/29/2013

Amount of Contribution: \$ 1,333

Date Contribution Received:

Amount of Contribution: \$

Check here if using V-C of the Addendum for additional Contributions:

Contributions from Single Source # 20

Single Source Entity's Name: Community Bank Systems, Inc.
or

Single Source Person's Last Name:

First Name:

Address: 5790 Widewaters Pkwy

City: Syracuse

State: NY

Zip code: 13214-1850

Phone: (315) 445-3122

Date Contribution Received: 1/22/2013

Amount of Contribution: \$ 3,370

Date Contribution Received:

Amount of Contribution: \$

Check here if using V-C of the Addendum for additional Contributions:

Designated Addendum sheet for section V (A)

Please use the following addendum pages as continuation for the specified sections. If additional space is needed please make a copy of this sheet.

V Source of Funding Disclosure

A: Below, list all Contributions received from a Single Source. Include the date and the amount of the Contribution received.

Contributions from Single Source # 21

Single Source Entity's Name: Computer Task Group, Inc.
or

Single Source Person's Last Name:

First Name:

Address: 800 Delaware Ave

City: Buffalo

State: NY

Zip code: 14209-2006

Phone: (716) 887-7000

Date Contribution Received: 4/29/2013

Amount of Contribution: \$ 2,723

Date Contribution Received:

Amount of Contribution: \$

Check here if using V-C of the Addendum for additional Contributions:

Contributions from Single Source # 22

Single Source Entity's Name: Constellation

or
Single Source Person's Last Name:

First Name:

Address: 810 7th Ave

City: New York

State: NY

Zip code: 10019-5818

Phone: (866) 237-7693

Date Contribution Received: 1/3/2013

Amount of Contribution: \$ 250

Date Contribution Received: 1/11/2013

Amount of Contribution: \$ 501

Date Contribution Received: 4/29/2013

Amount of Contribution: \$ 1,359

Date Contribution Received: 6/10/2013

Amount of Contribution: \$ 12

Date Contribution Received: 6/20/2013

Amount of Contribution: \$ 375

Check here if using V-C of the Addendum for additional Contributions:

Contributions from Single Source # 23

Single Source Entity's Name: Constellation Brands, Inc.

or
Single Source Person's Last Name:

First Name:

Address: 207 High Point Drive

City: Victor

State: NY

Zip code: 14564-1061

Phone: (888) 724-2169

Date Contribution Received: 1/25/2013

Amount of Contribution: \$ 1,608

Date Contribution Received:

Amount of Contribution: \$

Check here if using V-C of the Addendum for additional Contributions:

Designated Addendum sheet for section V (A)

Please use the following addendum pages as continuation for the specified sections. If additional space is needed please make a copy of this sheet.

V Source of Funding Disclosure

A: Below, list all Contributions received from a Single Source. Include the date and the amount of the Contribution received.

Contributions from Single Source # 24

Single Source Entity's Name: Corning Incorporated
or

Single Source Person's Last Name:

First Name:

Address: MP-BH-06

City: Corning

State: NY

Zip code: 14831-0001

Phone: (607) 974-8540

Date Contribution Received: 1/28/2013

Amount of Contribution: \$ 9,193

Date Contribution Received: 4/8/2013

Amount of Contribution: \$ 60

Date Contribution Received: 5/9/2013

Amount of Contribution: \$ 12

Date Contribution Received:

Amount of Contribution: \$

Date Contribution Received:

Amount of Contribution: \$

Check here if using V-C of the Addendum for additional Contributions:

Contributions from Single Source # 25

Single Source Entity's Name: Cortland Medical Center
or

Single Source Person's Last Name:

First Name:

Address: 134 Homer Ave

City: Cortland

State: NY

Zip code: 13045-1206

Phone: (607) 756-3500

Date Contribution Received: 1/3/2013

Amount of Contribution: \$ 1,963

Date Contribution Received:

Amount of Contribution: \$

Check here if using V-C of the Addendum for additional Contributions:

Contributions from Single Source # 26

Single Source Entity's Name: CulinArt
or

Single Source Person's Last Name:

First Name:

Address: 175 Sunnyside Blvd

City: Plainview

State: NY

Zip code: 11803-1511

Phone: (516) 437-2700

Date Contribution Received: 1/30/2013

Amount of Contribution: \$ 1,303

Date Contribution Received:

Amount of Contribution: \$

Check here if using V-C of the Addendum for additional Contributions:

Designated Addendum sheet for section V (A)

Please use the following addendum pages as continuation for the specified sections. If additional space is needed please make a copy of this sheet.

V Source of Funding Disclosure

A: Below, list all Contributions received from a Single Source. Include the date and the amount of the Contribution received.

Contributions from Single Source # 27

Single Source Entity's Name: CVS Caremark Corporation
or

Single Source Person's Last Name:

First Name:

Address: 1 CVS Drive

City: Woonsocket

State: RI

Zip code: 02895-6146

Phone: (207) 272-2724

Date Contribution Received: 1/24/2013

Amount of Contribution: \$ 2,500

Date Contribution Received:

Amount of Contribution: \$

Check here if using V-C of the Addendum for additional Contributions:

Contributions from Single Source # 28

Single Source Entity's Name: David's Bridal, Inc.

or

Single Source Person's Last Name:

First Name:

Address: 1001 Washington Street

City: Conshohocken

State: PA

Zip code: 19428-2356

Phone: (610) 943-6290

Date Contribution Received: 1/28/2013

Amount of Contribution: \$ 1,272

Date Contribution Received:

Amount of Contribution: \$

Check here if using V-C of the Addendum for additional Contributions:

Contributions from Single Source # 29

Single Source Entity's Name: Delta Air Lines, Inc.

or

Single Source Person's Last Name:

First Name:

Address: 125 W 55th Street

City: New York

State: NY

Zip code: 10019-5369

Phone: (212) 258-0260

Date Contribution Received: 1/11/2013

Amount of Contribution: \$ 4,700

Date Contribution Received:

Amount of Contribution: \$

Check here if using V-C of the Addendum for additional Contributions:

Designated Addendum sheet for section V (A)

Please use the following addendum pages as continuation for the specified sections. If additional space is needed please make a copy of this sheet.

V Source of Funding Disclosure

A: Below, list all Contributions received from a Single Source. Include the date and the amount of the Contribution received.

Contributions from Single Source # 30

Single Source Entity's Name: Destiny USA
or

Single Source Person's Last Name:

First Name:

Address: 4 Clinton Square

City: Syracuse

State: NY

Zip code: 13202-1078

Phone: (315) 422-7000

Date Contribution Received: 2/28/2013

Amount of Contribution: \$ 2,716

Date Contribution Received:

Amount of Contribution: \$

Check here if using V-C of the Addendum for additional Contributions:

Contributions from Single Source # 31

Single Source Entity's Name: Dinosaur Restaurants LLC/Syracuse
or

Single Source Person's Last Name:

First Name:

Address: 234 W Genesee Street

City: Syracuse

State: NY

Zip code: 13202-1020

Phone: (315) 476-1662

Date Contribution Received: 1/2/2013

Amount of Contribution: \$ 1,569

Date Contribution Received:

Amount of Contribution: \$

Check here if using V-C of the Addendum for additional Contributions:

Contributions from Single Source # 32

Single Source Entity's Name: Dresser-Rand Company
or

Single Source Person's Last Name:

First Name:

Address: 500 Paul Clark Drive

City: Olean

State: NY

Zip code: 14760-9560

Phone: (716) 375-3540

Date Contribution Received: 4/25/2013

Amount of Contribution: \$ 4,379

Date Contribution Received:

Amount of Contribution: \$

Check here if using V-C of the Addendum for additional Contributions:

Designated Addendum sheet for section V (A)

Please use the following addendum pages as continuation for the specified sections. If additional space is needed please make a copy of this sheet.

V Source of Funding Disclosure

A: Below, list all Contributions received from a Single Source. Include the date and the amount of the Contribution received.

Contributions from Single Source # 33

Single Source Entity's Name: DuPont Company

or

Single Source Person's Last Name:

First Name:

Address: 302 Portsmouth Road

City: Cherry Hill

State: NJ

Zip code: 08034-3648

Phone: (609) 707-0210

Date Contribution Received: 3/8/2013

Amount of Contribution: \$ 2,250

Date Contribution Received:

Amount of Contribution: \$

Check here if using V-C of the Addendum for additional Contributions:

Contributions from Single Source # 34

Single Source Entity's Name: Eastman Kodak Company

or

Single Source Person's Last Name:

First Name:

Address: 1200 G St NW

City: Washington

State: DC

Zip code: 20005-3814

Phone: (202) 857-3474

Date Contribution Received: 6/10/2013

Amount of Contribution: \$ 2,500

Date Contribution Received:

Amount of Contribution: \$

Check here if using V-C of the Addendum for additional Contributions:

Contributions from Single Source # 35

Single Source Entity's Name: Edelman

or

Single Source Person's Last Name:

First Name:

Address: 250 Hudson Street

City: New York

State: NY

Zip code: 10013-1413

Phone: (212) 704-8255

Date Contribution Received: 1/22/2013

Amount of Contribution: \$ 2,934

Date Contribution Received:

Amount of Contribution: \$

Check here if using V-C of the Addendum for additional Contributions:

Designated Addendum sheet for section V (A)

Please use the following addendum pages as continuation for the specified sections. If additional space is needed please make a copy of this sheet.

V Source of Funding Disclosure

A: Below, list all Contributions received from a Single Source. Include the date and the amount of the Contribution received.

Contributions from Single Source # 36

Single Source Entity's Name: Elant at Goshen, Inc.
or

Single Source Person's Last Name:

First Name:

Address: 46 Harriman Drive

City: Goshen

State: NY

Zip code: 10924-2410

Phone: (845) 291-3724

Date Contribution Received: 1/24/2013

Amount of Contribution: \$ 1,939

Date Contribution Received:

Amount of Contribution: \$

Check here if using V-C of the Addendum for additional Contributions:

Contributions from Single Source # 37

Single Source Entity's Name: EmblemHealth
or

Single Source Person's Last Name:

First Name:

Address: 55 Water Street

City: New York

State: NY

Zip code: 10041-0004

Phone: (646) 447-0098

Date Contribution Received: 1/25/2013

Amount of Contribution: \$ 250

Date Contribution Received: 5/8/2013

Amount of Contribution: \$ 4,486

Date Contribution Received: 5/31/2013

Amount of Contribution: \$ 125

Date Contribution Received:

Amount of Contribution: \$

Date Contribution Received:

Amount of Contribution: \$

Check here if using V-C of the Addendum for additional Contributions:

Contributions from Single Source # 38

Single Source Entity's Name: Eric Mower + Associates
or

Single Source Person's Last Name:

First Name:

Address: 211 West Jefferson Street

City: Syracuse

State: NY

Zip code: 13202-2561

Phone: (315) 466-1000

Date Contribution Received: 2/5/2013

Amount of Contribution: \$ 1,399

Date Contribution Received: 4/1/2013

Amount of Contribution: \$ 15

Date Contribution Received: 6/5/2013

Amount of Contribution: \$ 25

Date Contribution Received: 6/27/2013

Amount of Contribution: \$ 50

Date Contribution Received:

Amount of Contribution: \$

Check here if using V-C of the Addendum for additional Contributions:

Designated Addendum sheet for section V (A)

Please use the following addendum pages as continuation for the specified sections. If additional space is needed please make a copy of this sheet.

V Source of Funding Disclosure

A: Below, list all Contributions received from a Single Source. Include the date and the amount of the Contribution received.

Contributions from Single Source # 39

Single Source Entity's Name: Ernst & Young LLP

or

Single Source Person's Last Name:

First Name:

Address: 5 Times Square

City: New York

State: NY

Zip code: 10036-6527

Phone: (212) 773-3000

Date Contribution Received: 2/5/2013

Amount of Contribution: \$ 10,468

Date Contribution Received: 4/16/2013

Amount of Contribution: \$ 74

Date Contribution Received:

Amount of Contribution: \$

Date Contribution Received:

Amount of Contribution: \$

Date Contribution Received:

Amount of Contribution: \$

Check here if using V-C of the Addendum for additional Contributions:

Contributions from Single Source # 40

Single Source Entity's Name: Express Scripts, Inc.

or

Single Source Person's Last Name:

First Name:

Address: 300 New Jersey Ave, NW

City: Washington

State: DC

Zip code: 20001-2030

Phone: (952) 837-5103

Date Contribution Received: 6/24/2013

Amount of Contribution: \$ 2,796

Date Contribution Received:

Amount of Contribution: \$

Check here if using V-C of the Addendum for additional Contributions:

Contributions from Single Source # 41

Single Source Entity's Name: Exxon Mobil Corporation

or

Single Source Person's Last Name:

First Name:

Address: 502 Keystone Drive

City: Warrendale

State: PA

Zip code: 15086-7537

Phone: (724) 772-9576

Date Contribution Received: 2/5/2013

Amount of Contribution: \$ 1,359

Date Contribution Received:

Amount of Contribution: \$

Check here if using V-C of the Addendum for additional Contributions:

Designated Addendum sheet for section V (A)

Please use the following addendum pages as continuation for the specified sections. If additional space is needed please make a copy of this sheet.

V Source of Funding Disclosure

A: Below, list all Contributions received from a Single Source. Include the date and the amount of the Contribution received.

Contributions from Single Source # 42

Single Source Entity's Name: Facebook
or

Single Source Person's Last Name:

First Name:

Address: 1155 F St NW

City: Washington

State: DC

Zip code: 20004-1312

Phone: (202) 420-0173

Date Contribution Received: 1/31/2013

Amount of Contribution: \$ 3,125

Date Contribution Received: 6/10/2013

Amount of Contribution: \$ 2,716

Date Contribution Received:

Amount of Contribution: \$

Date Contribution Received:

Amount of Contribution: \$

Date Contribution Received:

Amount of Contribution: \$

Check here if using V-C of the Addendum for additional Contributions:

Contributions from Single Source # 43

Single Source Entity's Name: Five Star Bank
or

Single Source Person's Last Name:

First Name:

Address: 220 Liberty Street

City: Warsaw

State: NY

Zip code: 14569-1465

Phone: (585) 786-1101

Date Contribution Received: 3/11/2013

Amount of Contribution: \$ 1,810

Date Contribution Received:

Amount of Contribution: \$

Check here if using V-C of the Addendum for additional Contributions:

Contributions from Single Source # 44

Single Source Entity's Name: General Electric Company
or

Single Source Person's Last Name:

First Name:

Address: 1100 Technology Park Drive

City: Billerica

State: MA

Zip code: 01821-4111

Phone: (404) 754-1158

Date Contribution Received: 4/22/2013

Amount of Contribution: \$ 87

Date Contribution Received: 4/25/2013

Amount of Contribution: \$ 5,000

Date Contribution Received:

Amount of Contribution: \$

Date Contribution Received:

Amount of Contribution: \$

Date Contribution Received:

Amount of Contribution: \$

Check here if using V-C of the Addendum for additional Contributions:

Designated Addendum sheet for section V (A)

Please use the following addendum pages as continuation for the specified sections. If additional space is needed please make a copy of this sheet.

V Source of Funding Disclosure

A: Below, list all Contributions received from a Single Source. Include the date and the amount of the Contribution received.

Contributions from Single Source # 45

Single Source Entity's Name: General Motors Corporation
or

Single Source Person's Last Name:

First Name:

Address: 25 Massachusetts Ave NW

City: Washington

State: DC

Zip code: 20001-1430

Phone: (248) 813-2620

Date Contribution Received: 2/25/2013

Amount of Contribution: \$ 3,750

Date Contribution Received:

Amount of Contribution: \$

Check here if using V-C of the Addendum for additional Contributions:

Contributions from Single Source # 46

Single Source Entity's Name: Georgia -Pacific Corporation
or

Single Source Person's Last Name:

First Name:

Address: 600 14th St NW

City: Washington

State: DC

Zip code: 20005-2008

Phone: (202) 879-8522

Date Contribution Received: 2/28/2013

Amount of Contribution: \$ 1,284

Date Contribution Received:

Amount of Contribution: \$

Check here if using V-C of the Addendum for additional Contributions:

Contributions from Single Source # 47

Single Source Entity's Name: Greenberg Traurig, P.A.
or

Single Source Person's Last Name:

First Name:

Address: 625 E Twiggs Street

City: Tampa

State: FL

Zip code: 33602-3931

Phone: (212) 801-9311

Date Contribution Received: 3/18/2013

Amount of Contribution: \$ 60

Date Contribution Received: 4/1/2013

Amount of Contribution: \$ 1,246

Date Contribution Received:

Amount of Contribution: \$

Date Contribution Received:

Amount of Contribution: \$

Date Contribution Received:

Amount of Contribution: \$

Check here if using V-C of the Addendum for additional Contributions:

Designated Addendum sheet for section V (A)

Please use the following addendum pages as continuation for the specified sections. If additional space is needed please make a copy of this sheet.

V Source of Funding Disclosure

A: Below, list all Contributions received from a Single Source. Include the date and the amount of the Contribution received.

Contributions from Single Source # 48

Single Source Entity's Name: Harris Beach, PLLC

or

Single Source Person's Last Name:

First Name:

Address: 99 Garnsey Road

City: Pittsford

State: NY

Zip code: 14534-4565

Phone: (518) 427-9700

Date Contribution Received:	1/16/2013	Amount of Contribution: \$	560
Date Contribution Received:	3/7/2013	Amount of Contribution: \$	375
Date Contribution Received:	4/5/2013	Amount of Contribution: \$	7
Date Contribution Received:	4/10/2013	Amount of Contribution: \$	74
Date Contribution Received:	5/22/2013	Amount of Contribution: \$	12

Check here if using V-C of the Addendum for additional Contributions:

Contributions from Single Source # 49

Single Source Entity's Name: Hewlett-Packard Company

or

Single Source Person's Last Name:

First Name:

Address: 1331 Pennsylvania Ave NW

City: Washington

State: DC

Zip code: 20004-1710

Phone: (202) 637-4965

Date Contribution Received:	1/8/2013	Amount of Contribution: \$	9
Date Contribution Received:	2/19/2013	Amount of Contribution: \$	1,359
Date Contribution Received:	2/22/2013	Amount of Contribution: \$	9
Date Contribution Received:	5/22/2013	Amount of Contribution: \$	9
Date Contribution Received:	6/17/2013	Amount of Contribution: \$	138

Check here if using V-C of the Addendum for additional Contributions:

Contributions from Single Source # 50

Single Source Entity's Name: Hillside Family of Agencies

or

Single Source Person's Last Name:

First Name:

Address: 1183 Monroe Avenue

City: Rochester

State: NY

Zip code: 14620-1662

Phone: (585) 256-7601

Date Contribution Received:	3/22/2013	Amount of Contribution: \$	5,000
Date Contribution Received:		Amount of Contribution: \$	
Date Contribution Received:		Amount of Contribution: \$	
Date Contribution Received:		Amount of Contribution: \$	
Date Contribution Received:		Amount of Contribution: \$	

Check here if using V-C of the Addendum for additional Contributions:

Designated Addendum sheet for section V (A)

Please use the following addendum pages as continuation for the specified sections. If additional space is needed please make a copy of this sheet.

V Source of Funding Disclosure

A: Below, list all Contributions received from a Single Source. Include the date and the amount of the Contribution received.

Contributions from Single Source # 51

Single Source Entity's Name: Honeywell
or

Single Source Person's Last Name:

First Name:

Address: 101 Constitution Ave NW

City: Washington

State: DC

Zip code: 20001-2133

Phone: (202) 662-2657

Date Contribution Received: 3/29/2013

Amount of Contribution: \$ 1,901

Date Contribution Received:

Amount of Contribution: \$

Check here if using V-C of the Addendum for additional Contributions:

Contributions from Single Source # 52

Single Source Entity's Name: IBM Corporation
or

Single Source Person's Last Name:

First Name:

Address: 294 Route 100

City: Somers

State: NY

Zip code: 10589-3202

Phone: (914) 766-3801

Date Contribution Received: 1/8/2013

Amount of Contribution: \$ 44

Date Contribution Received: 1/29/2013

Amount of Contribution: \$ 500

Date Contribution Received: 6/20/2013

Amount of Contribution: \$ 34,250

Date Contribution Received:

Amount of Contribution: \$

Date Contribution Received:

Amount of Contribution: \$

Check here if using V-C of the Addendum for additional Contributions:

Contributions from Single Source # 53

Single Source Entity's Name: International Paper
or

Single Source Person's Last Name:

First Name:

Address: 16 N Carroll Street

City: Madison

State: WI

Zip code: 53703-2716

Phone: (608) 255-0231

Date Contribution Received: 1/4/2013

Amount of Contribution: \$ 500

Date Contribution Received: 2/26/2013

Amount of Contribution: \$ 2,371

Date Contribution Received: 3/6/2013

Amount of Contribution: \$ 300

Date Contribution Received:

Amount of Contribution: \$

Date Contribution Received:

Amount of Contribution: \$

Check here if using V-C of the Addendum for additional Contributions:

Designated Addendum sheet for section V (A)

Please use the following addendum pages as continuation for the specified sections. If additional space is needed please make a copy of this sheet.

V Source of Funding Disclosure

A: Below, list all Contributions received from a Single Source. Include the date and the amount of the Contribution received.

Contributions from Single Source # 54

Single Source Entity's Name: JPMorgan Chase & Co
or

Single Source Person's Last Name:

First Name:

Address: 270 Park Ave, 37th Floor

City: New York

State: NY

Zip code: 10017-2014

Phone: (518) 433-2508

Date Contribution Received: 3/4/2013

Amount of Contribution: \$ 8,150

Date Contribution Received: 5/24/2013

Amount of Contribution: \$ 69

Date Contribution Received:

Amount of Contribution: \$

Date Contribution Received:

Amount of Contribution: \$

Date Contribution Received:

Amount of Contribution: \$

Check here if using V-C of the Addendum for additional Contributions:

Contributions from Single Source # 55

Single Source Entity's Name: Kennedy Valve Division of McWane, Inc.

or

Single Source Person's Last Name:

First Name:

Address: PO Box 931

City: Elmira

State: NY

Zip code: 14902-0931

Phone: (607) 734-2211

Date Contribution Received: 4/1/2013

Amount of Contribution: \$ 1,323

Date Contribution Received:

Amount of Contribution: \$

Check here if using V-C of the Addendum for additional Contributions:

Contributions from Single Source # 56

Single Source Entity's Name: KPMG LLP

or

Single Source Person's Last Name:

First Name:

Address: 1801 K St NW

City: Washington

State: DC

Zip code: 20006-1301

Phone: (202) 533-4018

Date Contribution Received: 6/4/2013

Amount of Contribution: \$ 4,597

Date Contribution Received:

Amount of Contribution: \$

Check here if using V-C of the Addendum for additional Contributions:

Designated Addendum sheet for section V(A)

Please use the following addendum pages as continuation for the specified sections. If additional space is needed please make a copy of this sheet.

V Source of Funding Disclosure

A: Below, list all Contributions received from a Single Source. Include the date and the amount of the Contribution received.

Contributions from Single Source # 57

Single Source Entity's Name: Leatherstocking Corporation
or

Single Source Person's Last Name:

First Name:

Address: 1 Rockefeller Plaza

City: New York

State: NY

Zip code: 10020-2003

Phone: (212) 977-6900

Date Contribution Received: 2/21/2013

Amount of Contribution: \$ 1,341

Date Contribution Received:

Amount of Contribution: \$

Check here if using V-C of the Addendum for additional Contributions:

Contributions from Single Source # 58

Single Source Entity's Name: Merck & Co., Inc.

or

Single Source Person's Last Name:

First Name:

Address: 55 Dove Street

City: Albany

State: NY

Zip code: 12210-1908

Phone: (518) 436-1333

Date Contribution Received: 3/25/2013

Amount of Contribution: \$ 1,934

Date Contribution Received:

Amount of Contribution: \$

Check here if using V-C of the Addendum for additional Contributions:

Contributions from Single Source # 59

Single Source Entity's Name: Microsoft Corporation

or

Single Source Person's Last Name:

First Name:

Address: PO Box 432

City: Voorheesville

State: NY

Zip code: 12186-0432

Phone: (518) 368-8805

Date Contribution Received: 1/9/2013

Amount of Contribution: \$ 9

Date Contribution Received: 1/24/2013

Amount of Contribution: \$ 9

Date Contribution Received: 4/9/2013

Amount of Contribution: \$ 1,000

Date Contribution Received: 5/17/2013

Amount of Contribution: \$ 2,125

Date Contribution Received:

Amount of Contribution: \$

Check here if using V-C of the Addendum for additional Contributions:

Designated Addendum sheet for section V (A)

Please use the following addendum pages as continuation for the specified sections. If additional space is needed please make a copy of this sheet.

V Source of Funding Disclosure

A: Below, list all Contributions received from a Single Source. Include the date and the amount of the Contribution received.

Contributions from Single Source # 60

Single Source Entity's Name: Millennium Pipeline Company, LLC
or

Single Source Person's Last Name:

First Name:

Address: 1 Blue Hill Plaza

City: Pearl River

State: NY

Zip code: 10965-3104

Phone: (845) 620-1300

Date Contribution Received: 1/7/2013

Amount of Contribution: \$ 1,399

Date Contribution Received:

Amount of Contribution: \$

Check here if using V-C of the Addendum for additional Contributions:

Contributions from Single Source # 61

Single Source Entity's Name: Morgan Stanley
or

Single Source Person's Last Name:

First Name:

Address: 1633 Broadway

City: New York

State: NY

Zip code: 10019-6708

Phone: (212) 259-1200

Date Contribution Received: 6/26/2013

Amount of Contribution: \$ 5,433

Date Contribution Received:

Amount of Contribution: \$

Check here if using V-C of the Addendum for additional Contributions:

Contributions from Single Source # 62

Single Source Entity's Name: MVP Health Care
or

Single Source Person's Last Name:

First Name:

Address: 625 State Street

City: Schenectady

State: NY

Zip code: 12305-2111

Phone: (518) 370-2665

Date Contribution Received: 5/1/2013

Amount of Contribution: \$ 3,225

Date Contribution Received:

Amount of Contribution: \$

Check here if using V-C of the Addendum for additional Contributions:

Designated Addendum sheet for section V (A)

Please use the following addendum pages as continuation for the specified sections. If additional space is needed please make a copy of this sheet.

V Source of Funding Disclosure

A: Below, list all Contributions received from a Single Source. Include the date and the amount of the Contribution received.

Contributions from Single Source # 63

Single Source Entity's Name: New York Air Brake Corporation
or

Single Source Person's Last Name:

First Name:

Address: 748 Starbuck Ave

City: Watertown

State: NY

Zip code: 13601-1620

Phone: (315) 786-5200

Date Contribution Received: 6/26/2013

Amount of Contribution: \$ 1,387

Date Contribution Received:

Amount of Contribution: \$

Check here if using V-C of the Addendum for additional Contributions:

Contributions from Single Source # 64

Single Source Entity's Name: New York Gaming Association
or

Single Source Person's Last Name:

First Name:

Address: 99 Pine Street

City: Albany

State: NY

Zip code: 12207-2776

Phone: (518) 436-1122

Date Contribution Received: 1/17/2013

Amount of Contribution: \$ 2,796

Date Contribution Received: 1/22/2013

Amount of Contribution: \$ 1,250

Date Contribution Received:

Amount of Contribution: \$

Date Contribution Received:

Amount of Contribution: \$

Date Contribution Received:

Amount of Contribution: \$

Check here if using V-C of the Addendum for additional Contributions:

Contributions from Single Source # 65

Single Source Entity's Name: New York Independent System Operator
or

Single Source Person's Last Name:

First Name:

Address: 10 Krey Blvd

City: Rensselaer

State: NY

Zip code: 12144-9681

Phone: (518) 356-6178

Date Contribution Received: 1/31/2013

Amount of Contribution: \$ 1,505

Date Contribution Received:

Amount of Contribution: \$

Check here if using V-C of the Addendum for additional Contributions:

Designated Addendum sheet for section V (A)

Please use the following addendum pages as continuation for the specified sections. If additional space is needed please make a copy of this sheet.

V Source of Funding Disclosure

A: Below, list all Contributions received from a Single Source. Include the date and the amount of the Contribution received.

Contributions from Single Source # 66

Single Source Entity's Name: New York Power Authority
or

Single Source Person's Last Name:

First Name:

Address: 123 Main Street

City: White Plains

State: NY

Zip code: 10601-3104

Phone: (914) 390-8117

Date Contribution Received: 4/22/2013

Amount of Contribution: \$ 3,300

Date Contribution Received:

Amount of Contribution: \$

Check here if using V-C of the Addendum for additional Contributions:

Contributions from Single Source # 67

Single Source Entity's Name: Newmark Knight Frank
or

Single Source Person's Last Name:

First Name:

Address: 125 Park Ave

City: New York

State: NY

Zip code: 10017-5529

Phone: (212) 372-2400

Date Contribution Received: 2/13/2013

Amount of Contribution: \$ 2,716

Date Contribution Received:

Amount of Contribution: \$

Check here if using V-C of the Addendum for additional Contributions:

Contributions from Single Source # 68

Single Source Entity's Name: Nixon Peabody LLP
or

Single Source Person's Last Name:

First Name:

Address: 1300 Clinton Square

City: Rochester

State: NY

Zip code: 14604-1707

Phone: (585) 263-1447

Date Contribution Received: 1/22/2013

Amount of Contribution: \$ 1,492

Date Contribution Received: 4/12/2013

Amount of Contribution: \$ 72

Date Contribution Received: 5/24/2013

Amount of Contribution: \$ 238

Date Contribution Received:

Amount of Contribution: \$

Date Contribution Received:

Amount of Contribution: \$

Check here if using V-C of the Addendum for additional Contributions:

Designated Addendum sheet for section V (A)

Please use the following addendum pages as continuation for the specified sections. If additional space is needed please make a copy of this sheet.

V Source of Funding Disclosure

A: Below, list all Contributions received from a Single Source. Include the date and the amount of the Contribution received.

Contributions from Single Source # 69

Single Source Entity's Name: Norfolk Southern Corporation
or

Single Source Person's Last Name:

First Name:

Address: 322 3rd Street

City: Elizabethport

State: NJ

Zip code: 07206-2007

Phone: (717) 541-2250

Date Contribution Received: 6/3/2013

Amount of Contribution: \$ 1,608

Date Contribution Received:

Amount of Contribution: \$

Check here if using V-C of the Addendum for additional Contributions:

Contributions from Single Source # 70

Single Source Entity's Name: Nucor Steel Auburn, Inc.

or

Single Source Person's Last Name:

First Name:

Address: PO Box 2008

City: Auburn

State: NY

Zip code: 13021-1057

Phone: (315) 253-4561

Date Contribution Received: 2/25/2013

Amount of Contribution: \$ 1,336

Date Contribution Received: 4/12/2013

Amount of Contribution: \$ 72

Date Contribution Received:

Amount of Contribution: \$

Date Contribution Received:

Amount of Contribution: \$

Date Contribution Received:

Amount of Contribution: \$

Check here if using V-C of the Addendum for additional Contributions:

Contributions from Single Source # 71

Single Source Entity's Name: O-AT-KA Milk Products Cooperative, Inc.

or

Single Source Person's Last Name:

First Name:

Address: PO Box 718

City: Batavia

State: NY

Zip code: 14021-0718

Phone: (585) 343-0536

Date Contribution Received: 4/1/2013

Amount of Contribution: \$ 1,307

Date Contribution Received:

Amount of Contribution: \$

Check here if using V-C of the Addendum for additional Contributions:

Designated Addendum sheet for section V (A)

Please use the following addendum pages as continuation for the specified sections. If additional space is needed please make a copy of this sheet.

V Source of Funding Disclosure

A: Below, list all Contributions received from a Single Source. Include the date and the amount of the Contribution received.

Contributions from Single Source # 72

Single Source Entity's Name: O'Brien & Gere
or

Single Source Person's Last Name:

First Name:

Address: PO Box 4873

City: Syracuse

State: NY

Zip code: 13221-4873

Phone: (315) 956-6100

Date Contribution Received: 1/28/2013

Amount of Contribution: \$ 1,478

Date Contribution Received: 3/5/2013

Amount of Contribution: \$ 250

Date Contribution Received: 6/12/2013

Amount of Contribution: \$ 69

Date Contribution Received: 6/24/2013

Amount of Contribution: \$ 69

Date Contribution Received:

Amount of Contribution: \$

Check here if using V-C of the Addendum for additional Contributions:

Contributions from Single Source # 73

Single Source Entity's Name: Popular Community Bank
or

Single Source Person's Last Name:

First Name:

Address: 120 Broadway

City: New York

State: NY

Zip code: 10271-0002

Phone: (212) 445-1892

Date Contribution Received: 1/24/2013

Amount of Contribution: \$ 500

Date Contribution Received: 2/4/2013

Amount of Contribution: \$ 2,716

Date Contribution Received:

Amount of Contribution: \$

Date Contribution Received:

Amount of Contribution: \$

Date Contribution Received:

Amount of Contribution: \$

Check here if using V-C of the Addendum for additional Contributions:

Contributions from Single Source # 74

Single Source Entity's Name: Prudential Insurance Company
or

Single Source Person's Last Name:

First Name:

Address: 751 Broad Street, Fl 14

City: Newark

State: NJ

Zip code: 07102-3777

Phone: (973) 802-4848

Date Contribution Received: 3/7/2013

Amount of Contribution: \$ 1,377

Date Contribution Received:

Amount of Contribution: \$

Check here if using V-C of the Addendum for additional Contributions:

Designated Addendum sheet for section V (A)

Please use the following addendum pages as continuation for the specified sections. If additional space is needed please make a copy of this sheet.

V Source of Funding Disclosure

A: Below, list all Contributions received from a Single Source. Include the date and the amount of the Contribution received.

Contributions from Single Source # 75

Single Source Entity's Name: Raymour & Flanigan Furniture
or

Single Source Person's Last Name:

First Name:

Address: 7230 Morgan Road

City: Liverpool

State: NY

Zip code: 13090-4535

Phone: (315) 453-2500

Date Contribution Received: 2/28/2013

Amount of Contribution: \$ 298

Date Contribution Received: 3/29/2013

Amount of Contribution: \$ 298

Date Contribution Received: 4/30/2013

Amount of Contribution: \$ 298

Date Contribution Received: 5/31/2013

Amount of Contribution: \$ 298

Date Contribution Received: 6/28/2013

Amount of Contribution: \$ 298

Check here if using V-C of the Addendum for additional Contributions:

Contributions from Single Source # 76

Single Source Entity's Name: Rensselaer Polytechnic Institute
or

Single Source Person's Last Name:

First Name:

Address: 110 8th St

City: Troy

State: NY

Zip code: 12180-3522

Phone: (518) 276-6120

Date Contribution Received: 2/8/2013

Amount of Contribution: \$ 1,359

Date Contribution Received:

Amount of Contribution: \$

Check here if using V-C of the Addendum for additional Contributions:

Contributions from Single Source # 77

Single Source Entity's Name: Rochester Gas & Electric Corp
or

Single Source Person's Last Name:

First Name:

Address: 89 East Avenue

City: Rochester

State: NY

Zip code: 14649-0001

Phone: (585) 724-8714

Date Contribution Received: 2/19/2013

Amount of Contribution: \$ 2,112

Date Contribution Received:

Amount of Contribution: \$

Check here if using V-C of the Addendum for additional Contributions:

Designated Addendum sheet for section V (A)

Please use the following addendum pages as continuation for the specified sections. If additional space is needed please make a copy of this sheet.

V Source of Funding Disclosure

A: Below, list all Contributions received from a Single Source. Include the date and the amount of the Contribution received.

Contributions from Single Source # 78

Single Source Entity's Name: Security Mutual Life Insurance Co. of NY
or

Single Source Person's Last Name:

First Name:

Address: PO Box 1625

City: Binghamton

State: NY

Zip code: 13902-1625

Phone: (607) 723-3551

Date Contribution Received: 3/11/2013

Amount of Contribution: \$ 1,336

Date Contribution Received:

Amount of Contribution: \$

Check here if using V-C of the Addendum for additional Contributions:

Contributions from Single Source # 79

Single Source Entity's Name: State Farm Insurance, Ballston Spa Operations Center
or

Single Source Person's Last Name:

First Name:

Address: 100 State Farm Place

City: Ballston Spa

State: NY

Zip code: 12020-3744

Phone: (518) 884-5121

Date Contribution Received: 2/22/2013

Amount of Contribution: \$ 2,716

Date Contribution Received:

Amount of Contribution: \$

Check here if using V-C of the Addendum for additional Contributions:

Contributions from Single Source # 80

Single Source Entity's Name: Sunoco

or

Single Source Person's Last Name:

First Name:

Address: 1735 Market Street

City: Philadelphia

State: PA

Zip code: 19103-7501

Phone: (215) 977-3237

Date Contribution Received: 4/18/2013

Amount of Contribution: \$ 500

Date Contribution Received: 4/19/2013

Amount of Contribution: \$ 500

Date Contribution Received: 4/22/2013

Amount of Contribution: \$ 500

Date Contribution Received: 4/23/2013

Amount of Contribution: \$ 500

Date Contribution Received: 4/24/2013

Amount of Contribution: \$ 500

Check here if using V-C of the Addendum for additional Contributions:

Designated Addendum sheet for section V (A)

Please use the following addendum pages as continuation for the specified sections. If additional space is needed please make a copy of this sheet.

V Source of Funding Disclosure

A: Below, list all Contributions received from a Single Source. Include the date and the amount of the Contribution received.

Contributions from Single Source # 81

Single Source Entity's Name: Syracuse Community Health Center, Inc.
or

Single Source Person's Last Name:

First Name:

Address: 819 S Salina Street

City: Syracuse

State: NY

Zip code: 13202-3527

Phone: (315) 476-7921

Date Contribution Received: 6/25/2013

Amount of Contribution: \$ 1,355

Date Contribution Received:

Amount of Contribution: \$

Check here if using V-C of the Addendum for additional Contributions:

Contributions from Single Source # 82

Single Source Entity's Name: Syracuse University
or

Single Source Person's Last Name:

First Name:

Address: 2-212 Science & Technology Bldg

City: Syracuse

State: NY

Zip code: 13244-4100

Phone: (315) 443-3919

Date Contribution Received: 5/30/2013

Amount of Contribution: \$ 1,399

Date Contribution Received:

Amount of Contribution: \$

Check here if using V-C of the Addendum for additional Contributions:

Contributions from Single Source # 83

Single Source Entity's Name: The Hiliard Corporation
or

Single Source Person's Last Name:

First Name:

Address: 100 W 4th Street

City: Elmira

State: NY

Zip code: 14901-2148

Phone: (607) 733-7121

Date Contribution Received: 4/24/2013

Amount of Contribution: \$ 1,750

Date Contribution Received:

Amount of Contribution: \$

Check here if using V-C of the Addendum for additional Contributions:

Designated Addendum sheet for section V (A)

Please use the following addendum pages as continuation for the specified sections. If additional space is needed please make a copy of this sheet.

Source of Funding Disclosure

A: Below, list all Contributions received from a Single Source. Include the date and the amount of the Contribution received.

Contributions from Single Source # 84

Single Source Entity's Name: The Lifetime Healthcare Companies
or

Single Source Person's Last Name:

First Name:

Address: 165 Court Street

City: Rochester

State: NY

Zip code: 14647-0001

Phone: (585) 327-6540

Date Contribution Received: 3/25/2013

Amount of Contribution: \$ 5,958

Date Contribution Received:

Amount of Contribution: \$

Check here if using V-C of the Addendum for additional Contributions:

Contributions from Single Source # 85

Single Source Entity's Name: The McGraw-Hill Companies, Inc.
or

Single Source Person's Last Name:

First Name:

Address: 1221 Avenue of the Americas

City: New York

State: NY

Zip code: 10020-1001

Phone: (212) 512-2324

Date Contribution Received: 3/21/2013

Amount of Contribution: \$ 1,250

Date Contribution Received:

Amount of Contribution: \$

Check here if using V-C of the Addendum for additional Contributions:

Contributions from Single Source # 86

Single Source Entity's Name: The Pike Company, Inc.
or

Single Source Person's Last Name:

First Name:

Address: 1 Circle Street

City: Rochester

State: NY

Zip code: 14607-1007

Phone: (585) 271-5256

Date Contribution Received: 4/1/2013

Amount of Contribution: \$ 1,328

Date Contribution Received: 5/24/2013

Amount of Contribution: \$ 25

Date Contribution Received:

Amount of Contribution: \$

Date Contribution Received:

Amount of Contribution: \$

Date Contribution Received:

Amount of Contribution: \$

Check here if using V-C of the Addendum for additional Contributions:

Designated Addendum sheet for section V (A)

Please use the following addendum pages as continuation for the specified sections. If additional space is needed please make a copy of this sheet.

V Source of Funding Disclosure

A: Below, list all Contributions received from a Single Source. Include the date and the amount of the Contribution received.

Contributions from Single Source # 87

Single Source Entity's Name: The Port Authority of New York and New Jersey
or

Single Source Person's Last Name:

First Name:

Address: 225 Park Ave S

City: New York

State: NY

Zip code: 10003-1604

Phone: (212) 435-6912

Date Contribution Received: 5/15/2013

Amount of Contribution: \$ 1,359

Date Contribution Received:

Amount of Contribution: \$

Check here if using V-C of the Addendum for additional Contributions:

Contributions from Single Source # 88

Single Source Entity's Name: The Sagamore
or

Single Source Person's Last Name:

First Name:

Address: 110 Sagamore Road

City: Bolton Landing

State: NY

Zip code: 12814-0450

Phone: (518) 743-6168

Date Contribution Received: 5/3/2013

Amount of Contribution: \$ 1,043

Date Contribution Received: 6/24/2013

Amount of Contribution: \$ 375

Date Contribution Received:

Amount of Contribution: \$

Date Contribution Received:

Amount of Contribution: \$

Date Contribution Received:

Amount of Contribution: \$

Check here if using V-C of the Addendum for additional Contributions:

Contributions from Single Source # 89

Single Source Entity's Name: The Travelers Companies, Inc.
or

Single Source Person's Last Name:

First Name:

Address: 1 Tower Square

City: Hartford

State: CT

Zip code: 06183-0001

Phone: (860) 277-4738

Date Contribution Received: 3/21/2013

Amount of Contribution: \$ 5,051

Date Contribution Received:

Amount of Contribution: \$

Check here if using V-C of the Addendum for additional Contributions:

Designated Addendum sheet for section V (A)

Please use the following addendum pages as continuation for the specified sections. If additional space is needed please make a copy of this sheet.

V Source of Funding Disclosure

A: Below, list all Contributions received from a Single Source. Include the date and the amount of the Contribution received.

Contributions from Single Source # 90

Single Source Entity's Name: Tishman Speyer
or

Single Source Person's Last Name:

First Name:

Address: 45 Rockefeller Plaza

City: New York

State: NY

Zip code: 10111-0100

Phone: (212) 715-0300

Date Contribution Received: 3/28/2013

Amount of Contribution: \$ 2,796

Date Contribution Received:

Amount of Contribution: \$

Check here if using V-C of the Addendum for additional Contributions:

Contributions from Single Source # 91

Single Source Entity's Name: T-Mobile USA, Inc.

or

Single Source Person's Last Name:

First Name:

Address: 2001 Butterfield Road

City: Downers Grove

State: IL

Zip code: 60515-1050

Phone: (773) 517-1601

Date Contribution Received: 3/28/2013

Amount of Contribution: \$ 2,500

Date Contribution Received: 4/19/2013

Amount of Contribution: \$ 9

Date Contribution Received:

Amount of Contribution: \$

Date Contribution Received:

Amount of Contribution: \$

Date Contribution Received:

Amount of Contribution: \$

Check here if using V-C of the Addendum for additional Contributions:

Contributions from Single Source # 92

Single Source Entity's Name: United Parcel Service

or

Single Source Person's Last Name:

First Name:

Address: 1200 Ward Avenue

City: West Chester

State: PA

Zip code: 19380-4258

Phone: (610) 430-6704

Date Contribution Received: 3/25/2013

Amount of Contribution: \$ 2,716

Date Contribution Received:

Amount of Contribution: \$

Check here if using V-C of the Addendum for additional Contributions:

Designated Addendum sheet for section V (A)

Please use the following addendum pages as continuation for the specified sections. If additional space is needed please make a copy of this sheet.

V Source of Funding Disclosure

A: Below, list all Contributions received from a Single Source. Include the date and the amount of the Contribution received.

Contributions from Single Source # 93

Single Source Entity's Name: UnitedHealthcare
or

Single Source Person's Last Name:

First Name:

Address: 1 Penn Plaza

City: New York

State: NY

Zip code: 10119-0002

Phone: (212) 912-4000

Date Contribution Received: 1/24/2013

Amount of Contribution: \$ 625

Date Contribution Received: 5/10/2013

Amount of Contribution: \$ 1,703

Date Contribution Received:

Amount of Contribution: \$

Date Contribution Received:

Amount of Contribution: \$

Date Contribution Received:

Amount of Contribution: \$

Check here if using V-C of the Addendum for additional Contributions:

Contributions from Single Source # 94

Single Source Entity's Name: University at Buffalo
or

Single Source Person's Last Name:

First Name:

Address: 501 Capen Hall

City: Buffalo

State: NY

Zip code: 14260-1600

Phone: (716) 645-2901

Date Contribution Received: 1/9/2013

Amount of Contribution: \$ 1,325

Date Contribution Received:

Amount of Contribution: \$

Check here if using V-C of the Addendum for additional Contributions:

Contributions from Single Source # 95

Single Source Entity's Name: University of Rochester Medical Center
or

Single Source Person's Last Name:

First Name:

Address: PO Box 706

City: Rochester

State: NY

Zip code: 14642-0001

Phone: (585) 275-5263

Date Contribution Received: 5/15/2013

Amount of Contribution: \$ 1,359

Date Contribution Received:

Amount of Contribution: \$

Check here if using V-C of the Addendum for additional Contributions:

Designated Addendum sheet for section V (A)

Please use the following addendum pages as continuation for the specified sections. If additional space is needed please make a copy of this sheet.

V Source of Funding Disclosure

A: Below, list all Contributions received from a Single Source. Include the date and the amount of the Contribution received.

Contributions from Single Source # 96

Single Source Entity's Name: Utica Mutual Insurance Company
or

Single Source Person's Last Name:

First Name:

Address: PO Box 530

City: Utica

State: NY

Zip code: 13503-0530

Phone: (315) 734-2000

Date Contribution Received: 1/30/2013

Amount of Contribution: \$ 3

Date Contribution Received: 2/25/2013

Amount of Contribution: \$ 2,269

Date Contribution Received:

Amount of Contribution: \$

Date Contribution Received:

Amount of Contribution: \$

Date Contribution Received:

Amount of Contribution: \$

Check here if using V-C of the Addendum for additional Contributions:

Contributions from Single Source # 97

Single Source Entity's Name: Verizon Communications
or

Single Source Person's Last Name:

First Name:

Address: 540 Broad Street

City: Newark

State: NJ

Zip code: 07102-3112

Phone: (973) 649-2424

Date Contribution Received: 1/25/2013

Amount of Contribution: \$ 12,500

Date Contribution Received: 3/14/2013

Amount of Contribution: \$ 1,250

Date Contribution Received:

Amount of Contribution: \$

Date Contribution Received:

Amount of Contribution: \$

Date Contribution Received:

Amount of Contribution: \$

Check here if using V-C of the Addendum for additional Contributions:

Contributions from Single Source # 98

Single Source Entity's Name: Watkins Glen International
or

Single Source Person's Last Name:

First Name:

Address: 2790 County Route 16

City: Watkins Glen

State: NY

Zip code: 14891-0500

Phone: (607) 535-2486

Date Contribution Received: 4/4/2013

Amount of Contribution: \$ 1,267

Date Contribution Received: 5/10/2013

Amount of Contribution: \$ 69

Date Contribution Received: 6/3/2013

Amount of Contribution: \$ 56

Date Contribution Received:

Amount of Contribution: \$

Date Contribution Received:

Amount of Contribution: \$

Check here if using V-C of the Addendum for additional Contributions:

Designated Addendum sheet for section V (A)

Please use the following addendum pages as continuation for the specified sections. If additional space is needed please make a copy of this sheet.

V Source of Funding Disclosure

A: Below, list all Contributions received from a Single Source. Include the date and the amount of the Contribution received.

Contributions from Single Source # 99

Single Source Entity's Name: Welch Allyn, Inc.

or

Single Source Person's Last Name:

First Name:

Address: 4341 State Street Road

City: Skaneateles

State: NY

Zip code: 13153-5300

Phone: (315) 685-4100

Date Contribution Received: 1/11/2013

Amount of Contribution: \$ 2,462

Date Contribution Received:

Amount of Contribution: \$

Check here if using V-C of the Addendum for additional Contributions:

Contributions from Single Source #

Single Source Entity's Name:

or

Single Source Person's Last Name:

First Name:

Address:

City:

State:

Zip code:

Phone:

Date Contribution Received:

Amount of Contribution: \$

Check here if using V-C of the Addendum for additional Contributions:

Contributions from Single Source #

Single Source Entity's Name:

or

Single Source Person's Last Name:

First Name:

Address:

City:

State:

Zip code:

Phone:

Date Contribution Received:

Amount of Contribution: \$

Check here if using V-C of the Addendum for additional Contributions:

V Source of Funding Disclosure

B Single Source information for a Contribution(s) from multiple, Related, or Affiliated Entities.

Contributions from Single Source #1

Related or Affiliated Entity or Person:

Entity's or Person's Full Name:

Entity's or Person's Address:

Entity's or Person's Phone:

Dates and Amounts of Contributions from Entity or Person:

Date Contribution Received: / / Amount of Contribution: \$.00

Date Contribution Received: / / Amount of Contribution: \$.00

Date Contribution Received: / / Amount of Contribution: \$.00

Check here if using section V(C) of the Addendum for additional Contributions:

Related or Affiliated Entity or Person:

Entity's or Person's Full Name:

Entity's or Person's Address:

Entity's or Person's Phone:

Dates and Amounts of Contributions from Entity or Person:

Date Contribution Received: / / Amount of Contribution: \$.00

Date Contribution Received: / / Amount of Contribution: \$.00

Date Contribution Received: / / Amount of Contribution: \$.00

Check here if using section V(C) of the Addendum for additional Contributions:

Check here if using section V(B) of the Addendum for additional Related, or Affiliated Entities or Persons:

Contributions from Single Source #2

Related or Affiliated Entity or Person:

Entity's or Person's Full Name:

Entity's or Person's Address:

Entity's or Person's Phone:

Dates and Amounts of Contributions from Entity or Person:

Date Contribution Received: / / Amount of Contribution: \$.00

Date Contribution Received: / / Amount of Contribution: \$.00

Date Contribution Received: / / Amount of Contribution: \$.00

Check here if using section V(C) of the Addendum for additional Contributions:

Related or Affiliated Entity or Person:

Entity's or Person's Full Name:

Entity's or Person's Address:

Entity's or Person's Phone:

Dates and Amounts of Contributions from Entity or Person:

Date Contribution Received: / / Amount of Contribution: \$.00

Date Contribution Received: / / Amount of Contribution: \$.00

Date Contribution Received: / / Amount of Contribution: \$.00

Check here if using section V(C) of the Addendum for additional Contributions:

Check here if using section V(B) of the Addendum for additional Related, or Affiliated Entities or Persons:

Check here if there are Contribution(s) from Single Source(s) other than those listed above. Use Section V(B) of the Addendum to list all such Contributions:

VI Subjects lobbied:

Continued on attached pages

VII Person, State Agency, Municipality or Legislative Body lobbied:

Continued on attached pages

VII Bill, Rule, Regulation, Rate Number or brief description relative to the introduction or intended introduction of legislation or a resolution on which you lobbied:

Continued on attached pages

VIII Title and Identifying Numbers of procurement contracts/documents lobbied:

Continued on attached pages

IX Number or Subject Matter of Executive Order of Governor/Municipality lobbied:

Continued on attached pages

X Subject Matter of and Tribes involved in tribal-state compacts, etc lobbied:

Continued on attached pages

XI Declaration

This Declaration must be signed by the Chief Administrative Officer. (If the Chief Administrative Officer, for any reason, does not sign, he/she must duly designate another person to sign this Declaration.) **(See instructions.)**

I declare under penalty of perjury that the information contained in this report is true, correct, and complete to the best of my knowledge and belief.

X SIGNATURE: *Suzanne M. Jensen*

DATE: 7/12/13

PRINT NAME: LAST Jensen

FIRST Suzanne

TITLE: CFO

Mark One: Chief Administrative Officer Designee(Attach Letter)

The following MUST be attached to this report at the time of submission:

- You must attach a **\$50 dollar filing fee** to each semi-annual report. (No fee is required for amendments to the original)
- If applicable, a designation letter if you have marked designee in section XI.
- If applicable, continuation sheets for sections III, IV, V, VI, VII, VIII, IX and X.

PLEASE NOTE You may be assessed up to \$25 for each day this report is late.